

APPLICATION CHECKLIST

SUPPORTING MATERIAL TO BE SUBMITTED WITH THE APPLICATION

In order for your application to be considered complete, the following must be included as part of this application (**all figures must be provided in bold numerals, black ink, and metric units**). An incomplete or improperly prepared application may not be accepted and could result in processing delays.

Please Note: All applications are to be submitted via Portal, through the County's website. Portal, along with further instructions can be found at the following link: <https://portal.haldimandcounty.on.ca/cityviewportal>

1. Supporting Sketch: a sketch (on plain 8.5 x 11 inch paper, no graph paper) drawn to scale showing the following must be included (A sample sketch is included for your convenience):

| | |
|--------------------------|--|
| <input type="checkbox"/> | Boundaries and dimensions of the subject land including the part that is to be severed and the part that is to be retained. |
| <input type="checkbox"/> | Location, size, height and type of all existing and proposed buildings or structures on severed or retained lands, including the distance of the buildings or structures from front yard lot line, rear yard lot line and side yard lot lines. |
| <input type="checkbox"/> | Boundaries and dimensions of the land owned by the owner, including the subject land and adjacent land. |
| <input type="checkbox"/> | The distance between the subject land and the nearest municipal lot line or landmark, such as a railway crossing or bridge. |
| <input type="checkbox"/> | The location of all land previously severed from the parcel originally acquired by the current owner of the subject land. |
| <input type="checkbox"/> | The approximate location of all natural and artificial features on the subject land and adjacent lands, including railways, roads, watercourses, drainage ditches, irrigation ponds, river or stream banks, wetlands, wooded areas, buildings. |
| <input type="checkbox"/> | The current use(s) of the adjacent lands. |
| <input type="checkbox"/> | The location, width and name of any road within or abutting the subject land. Indicate whether the road is an unopened road allowance, a public travelled road, a private road or a right-of-way. |
| <input type="checkbox"/> | If access to the subject land is by water only, the location of the parking and docking facilities to be used. |
| <input type="checkbox"/> | The location and nature of any restrictive covenant or easement affecting the subject land. |
| <input type="checkbox"/> | If the severed parcel is to be conveyed to an abutting property owner, please identify the abutting property with name and instrument number exactly as now registered. |
| <input type="checkbox"/> | The location, size and distance to buildings and property lines of any existing sewage system treatment units (septic tanks) and distribution piping (septic beds) on the lot to be created and/or retained. |



2. Zoning Deficiency Form (Attached & to be completed by a Building Inspector).

3. Application Fee.

4. Conservation Authority fee, if applicable (Information available from staff. Conservation Authority fee schedules are also available at these websites: Niagara Peninsula Conservation Authority: www.conservation-niagara.on.ca; Grand River Conservation Authority: www.grandriver.ca; and Long Point Region Conservation Authority: www.lprca.on.ca).

Note: In case other documentation/supporting material become necessary, you will be asked to submit that prior to processing of your application.

NOTIFICATION SIGN REQUIREMENTS

For the purpose of public notification and in order for staff to easily locate your land, you will be given a sign to indicate the intent and purpose of your application. It is your responsibility to:

- 1. Post sign as soon as you receive it.**
- 2. Post one sign per frontage in a visible location on the subject property.**
- 3. Ensure one sign is posted at the front of the property at least three feet above ground level.**
- 4. Notify the Planner when the sign is in place in order to avoid processing delays.**
- 5. If the sign is not posted in accordance with the above, the Committee of Adjustment may choose to defer their decision.**
- 6. Maintain the sign until notice of decision is received and thereafter removed.**

For the purposes of this application, the Owner/Applicant/Agent grants permission to the relevant County staff to enter upon the said property for inspection purposes, and the owner will not be held responsible or liable if any accident or injury occurs.

SCHEDULE OF FEES

Notes:

1. Please make cheques for application fee payable to Haldimand County.
2. A separate cheque payable to the relevant Conservation Authority is also required for applications that fall within that Conservation Authority's watershed.
3. Fees are subject to change.
4. Additional fees may be applicable, please contact Planning Staff for further information.

| <i>Fee Category</i> | <i>Fee (\$)</i> |
|--|---|
| A. Base Fee: | |
| i) Complex application* | 2,754.00 |
| ii) Standard application** | 1,831.00 |
| B. Building Review Fee - Sewage System Assessment <i>(applies only to properties without municipal water/sewer)</i> | 363.00 |
| C. Conservation Authority Fee: | For lands located within Conservation Authorities' (Niagara Peninsula Conservation Authority, Grand River Conservation Authority, or Long Point Region Conservation Authority) watersheds, please contact planning staff, or refer to the Zoning By-law Interactive Map via the County's website. |
| D. Deferral – Applicant's request | 203.00 |
| E. Application Recirculation to agencies | 182.00 |
| F. Additional Fees for legal costs: | |
| i) OLT Appeal | 2,654.00 |
| ii) Preparation of OLT Appeal Record | 228.00 |

*Complex Application: An application that requires extensive staff review (i.e. application applies to multiple lots/properties, or has multiple supporting documents).

**Standard Application: An application relating to circumstances that are simple and require minimal staff review (i.e. applies to single lot/property).

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For Office Use Only

File No. **PLA-2024-** _____
Roll No. _____
Date Submitted _____
Date Received _____
Sign Issued _____
Planner's Initials _____

Application for Minor Variance

A. APPLICANT INFORMATION

1. Owner (s) _____ Phone No. _____
Address _____ Fax No. _____
_____ Postal Code _____
_____ E-Mail _____
2. Agent _____ Phone No. _____
Address _____ Fax No. _____
_____ Postal Code _____
_____ E-Mail _____

Please specify to whom all communications should be sent: ☐ Owner ☐ Agent

3. Names and addresses of any mortgagees, holders of charges or other encumbrances:

4. Are there any easements or restrictive covenants affecting the property?

☐ Yes ☐ No

If Yes, please describe the easement or covenant and its effect: _____



B. LOCATION/LEGAL DESCRIPTION OF PROPERTY

| | | | |
|------------------------|-------|-------------------|-------|
| Geographic Township | _____ | Urban Area/Hamlet | _____ |
| Concession Number | _____ | Lot Number | _____ |
| Registered Plan Number | _____ | Lot(s) Block(s) | _____ |
| Reference Plan Number | _____ | Part Numbers | _____ |
| Property Address | _____ | | |

C. PURPOSE OF APPLICATION

1. Please explain what you propose to do on the land/premises which makes this application necessary. (If additional space is required, please attach a separate sheet):

2. Nature and extent of relief applied for (zoning deficiency form is included for detailed reply):

3. Why is it not possible to comply with the provisions of the by-law?

4. Is there a time limit on this application?

☐ Yes ☐ No

If yes, please explain: _____



D. PROPERTY DIMENSIONS, USE, ACCESS, SERVICING

1. Dimensions of the subject lands in *metric units*:

| <i>Frontage (m.)</i> | <i>Depth (m.)</i> | <i>Width (m.)</i> | <i>Area (ha.)</i> |
|----------------------|-------------------|-------------------|-------------------|
| | | | |

2. LOCATION AND PARTICULARS of ALL buildings or structures EXISTING on the subject land. (Specify distance from side, rear and front lot lines, ground floor area, gross floor area, number of storeys, width, length, height, etc., in metres. This must also be included on the attached sketch):

3. Date of construction of all existing buildings and structures on the subject land:

4. LOCATION AND PARTICULARS of ALL buildings or structures PROPOSED on the subject land (Specify distance from side, rear and front lot lines, ground floor area, gross floor area, number of storeys, width, length, height, etc., in metres. This must also be included on the attached sketch):

5. If an addition to an existing building is proposed, what will it be used for? (e.g. bedroom, kitchen, bathroom, etc.):

6. Date of acquisition of the subject land:

7. Previous use of the property:

8. Existing use of the subject property:

9. Length of time the existing use of the subject property has continued: _____

10. Existing use of abutting properties:

11. Existing or proposed access to the subject land:

| <i>Existing/Proposed</i> | <i>Provincial Hwy</i> | <i>Municipal Road</i> | <i>Unopened Road</i> | <i>Other</i> |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <i>Existing</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <i>Proposed</i> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please specify name of road/street: _____

12. Servicing: Please indicate what services are AVAILABLE and/or PROPOSED:

| Water Supply | | | Sewage Treatment | | | Storm Drainage | | |
|------------------|--------------------------|--------------------------|------------------------|--------------------------|--------------------------|----------------|--------------------------|--------------------------|
| Type | Avail. | Prop. | Type | Avail. | Prop. | Type | Avail. | Prop. |
| Municipal Water | <input type="checkbox"/> | <input type="checkbox"/> | Municipal Sewers | <input type="checkbox"/> | <input type="checkbox"/> | Storm Sewers | <input type="checkbox"/> | <input type="checkbox"/> |
| Communal System | <input type="checkbox"/> | <input type="checkbox"/> | Communal System | <input type="checkbox"/> | <input type="checkbox"/> | Open Ditches | <input type="checkbox"/> | <input type="checkbox"/> |
| Individual Wells | <input type="checkbox"/> | <input type="checkbox"/> | Septic Tank & Tile Bed | <input type="checkbox"/> | <input type="checkbox"/> | Unknown | <input type="checkbox"/> | <input type="checkbox"/> |
| Cistern | <input type="checkbox"/> | <input type="checkbox"/> | Unknown | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| Unknown | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |

13. Have you consulted with Public Works Department concerning storm-water management?

☐Yes ☐No

14. Does a legal and adequate outlet for storm drainage exist?

☐Yes ☐No ☐Unknown

15. Has the existing drainage on the subject land been altered?

☐Yes ☐No ☐Unknown



16. Have you consulted with Hydro One regarding any required setbacks?

☐ Yes ☐ No ☐ Unknown

E. LAND USE

1. What is the existing official plan designation(s) of the subject land? _____

2. What is the existing zoning of the subject land? _____

(If required, assistance from Planning staff is available to answer questions 1 and 2 above).

3. Are any of the following uses or features located on the subject land or within 500 metres (1,640 feet) of the subject land? Please check appropriate boxes, if any apply

(If required, assistance from Planning staff is available to answer these questions)

| <i>Use or Feature</i> | <i>On the Subject Land</i> | <i>Within 500 metres (1,640') of subject land (Indicate distance)</i> |
|--|----------------------------|--|
| An agricultural operation, including livestock facility or stockyard | | |
| A municipal landfill | | |
| A sewage treatment plant or waste stabilization plant | | |
| A Provincially significant wetland (Class 1,2 or 3 wetland) or other environmental feature | | |
| Floodplain | | |
| A rehabilitated mine site | | |
| A non-operating mine site within 1 kilometre | | |
| An active mine site | | |

| <i>Use or Feature</i> | <i>On the Subject Land</i> | <i>Within 500 metres (1,640') of subject land (Indicate distance)</i> |
|--|----------------------------|--|
| An industrial or commercial use (specify the use(s)) | | |
| An active railway line | | |
| Seasonal wetness of land | | |
| Erosion | | |
| Abandoned gas wells | | |

Note: If there are any livestock operations within 500 metres (1,640 feet) of the subject land, please complete Form 3 which is available upon request.

F. PROVINCIAL POLICY

1. Is the proposal consistent with Provincial Policy Statements issued under Subsection 3(1) of the Planning Act, 1990, R.S.O. as amended?

☐ Yes ☐ No

Please explain: _____

2. Is the subject land within an area of land designated under any provincial plan(s)?

☐ Yes ☐ No

If yes, does the application conform to the applicable provincial plan(s)?

☐ Yes ☐ No

Please explain: _____



G. STATUS OF OTHER PLANNING APPLICATIONS

1. Has the owner previously applied for relief for the subject property?

☐ Yes ☐ No

If yes, describe briefly: _____

2. Is this property the subject of a current application for consent/severance under Section 53 of the Planning Act, R.S.O., 1990, as amended?

☐ Yes ☐ No

If yes, provide the file number:

File No.: _____ Decision: _____

3. Is this property part of a current application for a plan of subdivision under Section 51 of the Planning Act, R.S.O., 1990, as amended?

☐ Yes ☐ No

If yes, provide file number:

File No.: _____ Decision: _____

4. Is there any other application on this property that could affect this application?

☐ Yes ☐ No

If yes, describe: _____

H. OTHER INFORMATION

1. Is there any other information that you think may be useful in the review of this application? If so,

Please explain below or attach on a separate page:



I. COLLECTION OF PERSONAL INFORMATION

Personal Information collected on this form is collected pursuant to the Planning Act and will be used for the purposes of processing this application. Questions about this collection may be directed to Haldimand County's Planning & Development Division at 905-318-5932 ext. 6209 or planning@haldimandcounty.on.ca.

☐

J. DECLARATION

Through submission of this application, I/we solemnly declare that I/we have reviewed and completed this application and all of the above statements and the statements contained in all of the exhibits/attachments transmitted herewith are true and correct. I acknowledge that all legislation and requirements governing this type of application shall be complied with whether specified herein or not. I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

☐

K. AUTHORIZATION

If the applicant is not the owner of the land that is the subject of this application, the authorization set out below must be completed by the owner.

AUTHORIZATION OF OWNER (S)

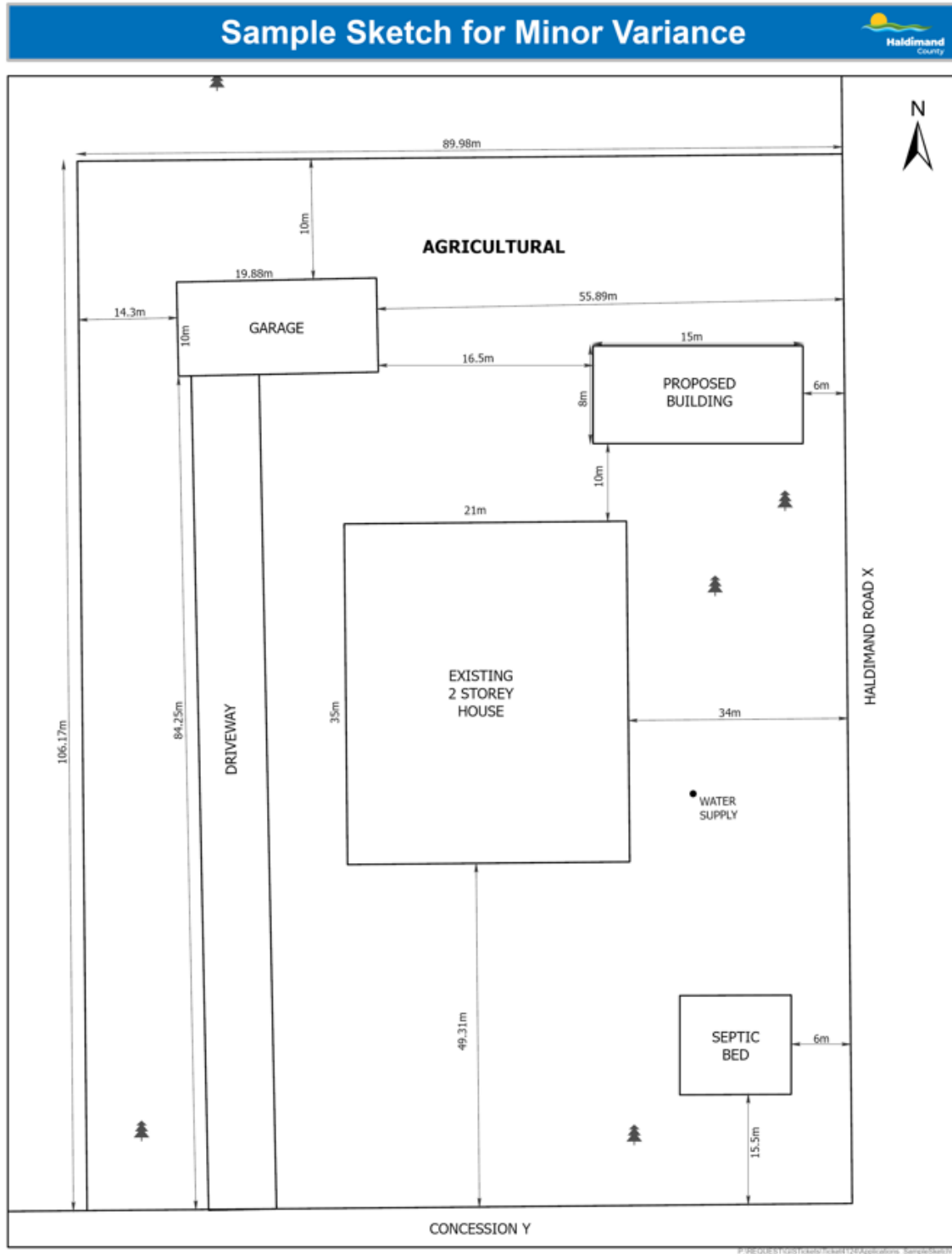
I/we _____ am/are the owner(s) of the land that is the subject of this zoning application. I/we authorize _____ to make this application on my/our behalf and to provide any of my/our personal information necessary for the processing of this application.

Acknowledgement of Owner(s) Authorization

☐

Signature (s)

Date





L. SUBMISSION OF COMPLETE APPLICATION/FOR MORE INFORMATION

For submitting a complete application, getting additional information or assistance in completing this application, please contact the Committee of Adjustment Secretary-Treasurer at (905) 318-5932 (Ext. 6220) or a Planner at the office below. In case reference to Haldimand County maps is required to complete the application, they are available at the County website: www.haldimandcounty.on.ca . Complete applications can be submitted at the following offices Monday to Friday between 8:30 am and 4:30 pm:

Haldimand County Planning
and Development Division
53 Thorburn Street South
Cayuga ON N0A 1E0
Phone: (905)-318-5932



Haldimand County
Building Division
ZONING DEFICIENCY FORM

*****IMPORTANT:** This form is not complete unless it is accompanied by an attached "Lot Diagram Plan" indicating all applicable site conditions. ***

INSTRUCTIONS: *Owner/Applicant to complete unshaded areas* ♦ *Building Inspector to complete shaded areas*

PROPOSAL FAILS TO MEET DEVELOPMENT STANDARDS

Owner/Applicant: _____ Assessment Roll #: _____

Location of Property: Lot _____ Conc. _____ Block _____ Plan _____

Part _____ Reference Plan _____ Former Municipality _____

Civic Address: _____

Applicable Land Use By-law: HC-1-2020 (Separate Sheet for each By-law)

Current Zoning: _____ Proposed Use: _____ ☐ Permitted ☐ Not Permitted

Amended by: _____ Existing Use: _____

| Development Standards | Required | "Proposed" (Based on Plot Plan) | Deficiency |
|--|----------|------------------------------------|------------|
| a) Lot Area | _____ | _____ | _____ |
| b) Lot Frontage | _____ | _____ | _____ |
| c) Front Yard Setback | _____ | _____ | _____ |
| d) Exterior Side Yard | _____ | _____ | _____ |
| e) Interior Side Yard (Rt) <small>(Facing Building)</small> | _____ | _____ | _____ |
| f) Interior Side Yard (Lt) | _____ | _____ | _____ |
| g) Rear Yard | _____ | _____ | _____ |
| h) Dwelling Unit Area | _____ | _____ | _____ |
| i) % Lot Coverage | _____ | _____ | _____ |
| j) Height of Building | _____ | _____ | _____ |
| k) Houses Per Lot | _____ | _____ | _____ |
| l) Accessory Building | _____ | _____ | _____ |
| m) Parking | _____ | _____ | _____ |
| n) _____ | _____ | _____ | _____ |
| o) _____ | _____ | _____ | _____ |
| p) _____ | _____ | _____ | _____ |
| q) _____ | _____ | _____ | _____ |

The "PROPOSED" information and any supporting documents have been provided by the owner/applicant. The above information is only in respect to "Zoning" (Minor Variance, Zone Change, etc.) and does not relieve the applicant/owner from obtaining all other permits and/or approvals, such as Septic, Entrance and Building Permits, etc.

I, the owner/applicant take full responsibility for the accuracy of the "PROPOSED" information provided on this form.

Signatures: _____ Building Inspector

Date: _____ Date: _____

Submit completed form to the County Planner or the Secretary-Treasurer to the Committee of Adjustment. Your contact in this regard is:

Name: _____ Phone: _____

Address: _____